



#DFW

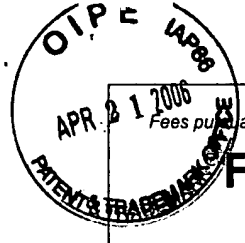
TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>	Application Number	10/756,195
	Filing Date	January 13, 2004
	First Named Inventor	Osama Khouri
	Art Unit	2813
	Examiner Name	Thanhha S. Pham
	Attorney Docket No.	854163.412

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to TC (<i>Appeal Notice, Brief, Reply Brief</i>)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration	<input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>):
<input checked="" type="checkbox"/> Information Disclosure Statement and Transmittal	<input type="checkbox"/> Statement under 37 CFR 3.73(b)	_____
<input type="checkbox"/> Cited References	<input type="checkbox"/> Terminal Disclaimer	_____
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	_____
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> CD, Number of CD(s) _____	_____
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	_____
<u>Remarks</u>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number	38106
Signature			
Printed Name	Robert Iannucci		
Date	April 18, 2006	Reg. No.	33,514

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	Jason Anover	Date: April 18, 2006

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. 770060



Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2006

Complete if Known

Application Number	10/756,195
Filing Date	January 13, 2004
First Named Inventor	Osama Khouri
Examiner Name	Thanhha S. Pham
Art Unit	2813
Attorney Docket No.	854163.412

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$180.00)

METHOD OF PAYMENT (check all that apply)

- Check**
 Credit Card
 Money Order
 Other (please identify): _____
 Deposit Account
 Deposit Account Number: 19-1090
 Deposit Account Name: Seed IP Law Group PLLC
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
 Charge fee(s) indicated below
 Charge fee(s) indicated below, **except for the filing fee**
 Charge any additional fee(s) or underpayments
 Charge any underpayments or credit any overpayments
 of fee(s) under 37 CFR 1.16 and 1.17

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
	Utility	300	150	500	250	200	
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
	Each claim over 20 (including Reissues)	50
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**
 _____ -20 or HP = _____ X _____ = _____ **Fee (\$)** **Fee Paid (\$)**
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**
 _____ -3 or HP = _____ X _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ -100 =	_____ /50 =	_____ (round up to a whole number)	x _____	_____

4. OTHER FEE(S)

Other (e.g., late filing surcharge):	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	_____
Other (e.g., late filing surcharge): <u>Submission of Information Disclosure Statement</u>	180
_____	_____
_____	_____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	33,514	Telephone	206-622-4900
Name (Print/Type)	Robert Iannucci	Date	April 18, 2006		



PATENT

I hereby certify that on the date specified below, this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date April 18, 2006 _____
Jason Añover

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Osama Khouri et al.
Application No. : 10/756,195
Filed : January 13, 2004
For : SUBLITHOGRAPHIC CONTACT STRUCTURE, IN PARTICULAR FOR A PHASE CHANGE MEMORY CELL, AND FABRICATION PROCESS THEREOF

Examiner : Thanhha S. Pham
Art Unit : 2813
Docket No. : 854163.412
Date : April 18, 2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT TRANSMITTAL

Commissioner for Patents:

In accordance with 37 CFR 1.56 and 1.97 through 1.98, applicants wish to make known to the U.S. Patent and Trademark Office the references set forth on the attached Information Disclosure Statement. Copies of cited U.S. patents and published patent applications are not required and accordingly have not been provided. Copies of any other cited references are enclosed. As to any reference cited, applicants do not admit that it is "prior art" under 35 U.S.C. §§ 102 or 103, and specifically reserve the right to traverse or antedate any such reference, as by a showing under 37 CFR 1.131 or other method. Although the aforesaid

reference, as by a showing under 37 CFR 1.131 or other method. Although the aforesaid references are made known to the Patent and Trademark Office in compliance with applicants' duty to disclose all information they are aware of which is believed relevant to the examination of the above-identified application, applicants believe that their invention is patentable.

Please acknowledge receipt of this Information Disclosure Statement and kindly make the cited references of record in the above-identified application.

A fee of \$180 is submitted in accordance with 37 CFR 1.97(c). The Director is authorized to charge any other fees which may be required, or credit any overpayment to Deposit Account No. 19-1090.

Respectfully submitted,
Seed Intellectual Property Law Group PLLC



Robert Iannucci
Registration No. 33,514

Enclosures:
Check
Information Disclosure Statement

701 Fifth Avenue, Suite 6300
Seattle, Washington 98104-7092
Phone: (206) 622-4900
Fax: (206) 682-6031

770065



U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE INFORMATION DISCLOSURE STATEMENT (Use several sheets if necessary)	ATTY. DOCKET NO. 854163.412	APPLICATION NO. 10/756,195
	APPLICANTS Osama Khouri et al.	
	FILING DATE January 13, 2004	GROUP ART UNIT 2813

U.S. PATENT DOCUMENTS

*EXAMINER INITIAL	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
AA	6,313,604	11/06/01	Maimon et al.	438	95	
AB	6,316,784	11/13/01	Zahorik et al.	257	3	
AC	6,440,837	08/27/02	Harshfield	438	618	
AD	6,545,287	04/08/03	Chiang	257	3	
AE	6,586,761	07/01/03	Lowrey	257	3	
AF	6,943,365	09/13/05	Lowrey et al.	257	3	
AG	6,969,866	11/29/05	Lowrey et al.	257	3	
AH	2002/0070401	06/13/02	Takeuchi et al.	257	296	
AI						
AJ						

FOREIGN PATENT DOCUMENTS

EXAMINER INITIAL	DOCUMENT NUMBER	DATE	COUNTRY	TRANSLATION	
				YES	NO
AK					
AL					
AM					
AN					
AO					

OTHER PRIOR ART *(Including Author, Title, Date, Pertinent Pages, Etc.)*

AP					
AQ					
AR					

EXAMINER	DATE CONSIDERED
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* EXAMINER: Initial if reference considered, whether or not criteria is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant(s).